

L11000000 2403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

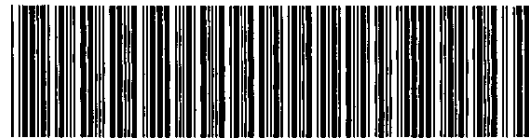
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800235968958

06/11/12--01025--009 **25.00

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 JUN 11 AM 9:02

J. SAULSBERRY
EXAMINER
JUN 12 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: K and M Relocation LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Muse

Name of Person

K and M Relocation

Firm/Company

12001 Belcher Rd. S. Apt. F91

Address

Largo Florida 33773

City/State and Zip Code

kandmrelocation@verizon.net

E-mail address: (to be used for future annual report notification)

FILED
2012 JUN 11 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Michael Muse

Name of Person

at (727)

688-0544

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: K and M Relocation LLC

2. (a) Principal office address of limited liability company: 12001 Belcher Rd. S.

(Note: **MUST BE STREET ADDRESS**)

Apt. F91

Largo Florida 33773

(b) Mailing address of limited liability company: 12001 Belcher Rd S

(Note: **MAY BE POST OFFICE BOX**)

Apt. F91

Largo Florida 33773

01-06-2011
3. Date of filing/registration in Florida

L11000002403
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: United States Corporation Agents

Registered Office Address: 13302 Winding Oaks Blvd
Suite A
Tampa Fl. 33612

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: Michael Muse

NEW Registered Office Address: 12001 Belcher Road S.
(MUST BE FLORIDA STREET ADDRESS) Apt. F91
Largo, FL 33773

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Michael D. Muse
Signature of a member or authorized representative of a member

Michael D. Muse
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Michael D. Muse
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00